

NOTIFICATION FOR UNDERGROUND STORAGE TANKS		State Use Only
State Agency Name and Address: Idaho Department of Environmental Quality, 1410 N Hilton, Boise ID 83706		Facility ID _____
TYPE OF NOTIFICATION		Date Received _____
<input type="checkbox"/> New Facility <input type="checkbox"/> Amended (update) <input type="checkbox"/> Closure		Date Entered into Computer _____ Data Entry Clerk Initials _____ Owner Was Contacted to Clarify Responses. Comments: _____ _____ _____ _____
_____ No. of Tanks at Facility _____ No. of Continuation Sheets Attached INSTRUCTIONS – See additional Instructions on page 6 Please type or print in ink all items except "signature" in section VII and XI. This form must be completed for each location containing underground storage tanks. If more than five (5) tanks are owned at this location, photocopy the following sheets, and staple continuation sheets to the form (pages 3, 4 & 5).		
GENERAL INFORMATION		
<p>Notification is required by Federal law for all underground tanks that have been used to store regulated substances since January 1, 1974, that are in the ground as of May 8, 1986, or that are brought into use after May 8, 1986. The information requested is required by Section 9002 of the Resource Conservation and Recovery Act, (RCRA), as amended.</p> <p>The primary purpose of this notification program is to locate and evaluate underground tanks that store or have stored petroleum or hazardous substances. It is expected that the information you provide will be based on reasonably available records, or in the absence of such records, your knowledge, belief, or recollection.</p> <p>Who must notify? Section 9002 of RCRA, as amended, requires that, unless exempted, owners of underground tanks that store regulated substances must notify designated State or local agencies of the existence of their tanks.</p> <p>Owner means -</p> <p style="padding-left: 20px;">a) in the case of an underground storage tank in use on November 8, 1984, or brought into use after that date, any person who owns an underground storage tank used for the storage, use, or dispensing of regulated substances, and</p> <p style="padding-left: 20px;">b) in the case of any underground storage tank in use before November 8, 1984, but no longer in use on that date, any person who owned such tank immediately before the discontinuation of its use.</p> <p style="padding-left: 20px;">c) if the State agency so requires, any facility that has undergone any changes to facility information or tank system status (only amended tank information needs to be included).</p> <p>What tanks are included? Underground storage tank is defined as any one or combination of tanks that (1) is used to contain an accumulation of "regulated substances," and (2) whose volume (including connected underground piping) is 10% or more beneath the ground. Some examples are underground tanks storing gasoline, used oil, diesel fuel, industrial solvents, pesticides, herbicides, or fumigants.</p> <p>What tanks are excluded? Tanks with a capacity of 110 gallons or less are not subject to notification. Other tanks excluded from notification are:</p> <ol style="list-style-type: none"> 1. farm or residential tanks of 1,100 gallons or less capacity used for storing motor fuel for noncommercial purposes; 2. tanks used for storing heating oil for consumptive use on the premises where stored; 3. septic tanks; 		
<p>4. pipeline facilities (including gathering lines) regulated under the Natural Gas Pipeline Safety Act of 1968, or the Hazardous Liquid Pipeline Safety Act of 1979, or which is an intrastate pipeline facility regulated under State laws;</p> <p>5. surface impoundments, pits, ponds, or lagoons;</p> <p>6. storm water or waste water collection systems;</p> <p>7. flow-through process tanks;</p> <p>8. liquid traps or associated gathering lines directly related to oil or gas production and gathering operations;</p> <p>9. storage tanks situated in an underground area (such as a basement, cellar, mine working drift, shaft, or tunnel) if the storage tank is situated upon or above the surface of the floor.</p> <p>What substances are covered? The notification requirements apply to underground storage tanks that contain regulated substances. This includes any substance defined as hazardous in section 101 (14) of the Comprehensive Environmental Response, Compensation and Liability Act of 1980 (CERCLA), with the exception of those substances regulated as hazardous waste under Subtitle C of RCRA. It also includes petroleum, e.g., crude oil or any fraction thereof which is liquid at standard conditions of temperature and pressure (60 degrees Fahrenheit and 14.7 pounds per square inch absolute).</p> <p>Where to notify? Send completed forms to:</p> <p style="text-align: center; padding-top: 20px;"> UST Coordinator Idaho Department of Environmental Quality 1410 N. Hilton Boise, ID 83706 Telephone: (208) 373-0502 </p> <p>When to notify? 1. Owners of underground storage tanks in use or that have been taken out of operation after January 1, 1974, but still in the ground, must notify by May 8, 1986. 2. Owners who bring underground storage tanks into use after May 8, 1986, must notify within 30 days of bringing the tanks into use. 3. If the State requires notification of any amendments to the facility send information to the State agency immediately.</p> <p>Penalties: Any owner who knowingly fails to notify or submits false information shall be subject to a civil penalty not to exceed \$10,000 for each tank for which notification is not given or for which false information is submitted.</p>		
I. OWNERSHIP OF TANK(S)		II. LOCATION OF TANK(S)
Name _____ Mailing Address _____ _____ City _____ State _____ ZIP Code _____ County _____ Phone Number (Including Area Code) _____		<p style="text-align: center;">(If same as Section I, mark box here <input type="checkbox"/>)</p> Name _____ Street Address (PO Box not acceptable) _____ _____ City _____ State _____ ZIP Code _____ County _____

III. TYPE OF OWNER		IV. INDIAN LANDS	
<input type="checkbox"/> Federal Government	<input type="checkbox"/> Commercial	Tanks are located on land within an Indian Reservation or on other trust lands. <input type="checkbox"/>	Tribe or Nation: _____
<input type="checkbox"/> State Government	<input type="checkbox"/> Private	Tanks are owned by a native American nation, tribe, or individual. <input type="checkbox"/>	
<input type="checkbox"/> Local Government			

V. TYPE OF FACILITY		
Select the Appropriate Facility Description		
_____ Gas Station	_____ Local Government	_____ Contractor
_____ Petroleum Distributor	_____ State Government	_____ Trucking/Transport
_____ Air Taxi (Airline)	_____ Federal – Non-Military	_____ Utilities
_____ Aircraft Owner	_____ Federal – Military	_____ Farm
_____ Auto Dealership	_____ Commercial	_____ Residential
_____ Railroad	_____ Industrial	_____ Other
		(explain) _____

VI. CONTACT PERSON IN CHARGE OF TANKS	
Name _____	City _____
Title _____	State _____ Zip Code _____
Address _____	Phone _____

VII. CERTIFICATION (Read and sign after completing all sections)	
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.	
Name and official title of owner or owner's authorized representative (Print)	
Name _____	
Title _____	
	Signature _____ Date Signed _____

VIII. FINANCIAL RESPONSIBILITY	
I have met the financial responsibility requirements in accordance with 40 CFR Subpart H. (Circle One) YES/NO	
Check All That Apply	
<input type="checkbox"/> Self Insurance	<input type="checkbox"/> Surety Bond
<input type="checkbox"/> Commercial Insurance	<input type="checkbox"/> Letter of Credit
<input type="checkbox"/> Rick Retention Group	<input type="checkbox"/> State Insurance Fund (PSTF)
<input type="checkbox"/> Guarantee	<input type="checkbox"/> Trust Fund
<input type="checkbox"/> Other Method Allowed, Specify _____	

EPA estimates public reporting burden for this form to average 30 minutes per response including time for reviewing instructions, gathering and maintaining the data needed and completing and reviewing the form. Send comments regarding this burden estimate to Chief, Information Policy Branch PM-223, US Environmental Protection Agency, 401 M Street, Washington D.C. 20460, marked "Attention Desk Officer for EPA." This form amends the previous notification form as printed in 40 CFR Part 280, Appendix I.

IX. DESCRIPTION OF UNDERGROUND STORAGE TANKS (Complete for each tank at this location)

IDENTIFICATION NUMBER	Tank No. _____	Tank No. _____	Tank No. _____	Tank No. _____	Tank No. _____
Compartmentalized Tanks? (circle one)	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO
Emergency Generator Tank? (circle one)	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO
A. Status of Tank					
Currently In Use					
Temporarily Out of Use (Complete Section X, Estimated Date Last Used)					
Permanently Out of Use (Complete Section X, tanks removed or closed in place)					
Date of Installation (mo./year)	____/____	____/____	____/____	____/____	____/____
Estimated Total Capacity (gallons)					
B. Material of Tank Construction (Mark all that apply)					
Asphalt Coated or Bare Steel					
Cathodically Protected Steel					
Epoxy Coated Steel					
Composite (Steel with Fiberglass)					
Fiberglass Reinforced Plastic					
Lined Interior					
Double Walled					
Polyethylene Tank Jacket					
Concrete					
Excavation Liner					
Unknown					
Other, Please Specify					
Has Tank been repaired? (circle one)	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO
C. Piping (Material) (Mark all that apply)					
Bare Steel					
Galvanized Steel					
Fiberglass Reinforced Plastic					
Copper					
Plastic/Flexible					
Cathodically Protected					
Double Walled					
Excavation Liner					
Other, Please Specify					
D. Piping (Type) (Mark all that Apply)					
Suction: no check valve at tank					
Suction: check valve at tank					
Pressure					
Gravity Feed					
Has piping been repaired? (circle one)	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO

TANK IDENTIFICATION NUMBER	Tank No. _____	Tank No. _____	Tank No. _____	Tank No. _____	Tank No. _____
E. Substance Currently or Last Stored In Greatest Quantity by Volume					
Gasoline					
Diesel					
Gasohol					
Kerosene					
Heating Oil					
Used Oil					
Other Petroleum Product					
(Please Specify)					
If not a petroleum product:					
Hazardous Substance (circle one)	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO
CERCLA name and/or,					
CAS Number (Chemical Abstract Service Registry #)					
If not listed above:					
Mixture of Substances (circle one)	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO
(Please Specify)					
X. TANKS OUT OF USE, OR CHANGE IN SERVICE					
Closing of Tank					
Tank was removed from ground					
Tanks was closed in ground					
Estimated date last used (mo./day/year)	__/__/__	__/__/__	__/__/__	__/__/__	__/__/__
Estimated date tank closed (mo./day/year)	__/__/__	__/__/__	__/__/__	__/__/__	__/__/__
Tank Filled with inert material (indicate material)					
Change in Service	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO
Site Assessment Completed and submitted to DEQ (Circle One)	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO
Evidence of a leak detected (circle one)	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO
Release reported to DEQ*	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO
Date release reported to DEQ**	__/__/__	__/__/__	__/__/__	__/__/__	__/__/__

*Refer to DEQ Information Series #3 for recommended practices for site assessments.

** Refer to DEQ Information Series #2 for release response and corrective action requirements.

XI. CERTIFICATION OF COMPLIANCE

(Complete for installation of all new tanks or for upgrading existing tanks at this location)

TANK IDENTIFICATION NUMBER	Tank No._____	Tank No._____	Tank No._____	Tank No._____	Tank No._____
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A. Installation (Mark all that apply)

Installer certified by tank and piping manufacturers					
Installer certified or licensed by the State					
Installation is inspected by a registered engineer					
Installation inspected by a local or State Agency					
Manufacturer's installation checklists have been completed					
Another method allowed by State Agency					
Please Specify					

B. Release Detection (Mark all that apply)

	Tank	Piping	Tank	Piping	Tank	Piping	Tank	Piping	Tank	Piping
Manual Tank Gauging										
Tank Tightness Testing										
Inventory Controls										
Automatic Tank Gauging										
Vapor Monitoring										
Groundwater Monitoring										
Interstitial Monitoring Double Walled Tank/Piping										
Interstitial Monitoring/Excavation Liner										
Automatic Line Leak Detectors										
Line Tightness Testing										
Other Method Allowed by Implementing agency:										
Please Specify:										

C. Spill and Overfill Protection

Overfill device installed (circle one)	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO
Spill device installed (circle one)	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO

Note: The installer must complete this section only if work on your underground storage tank system has taken place since December 22, 1988.

OATH: I certify the information concerning installation that is provided in section XI is true to the best of my belief and knowledge.

Installer:

Name_____

Signature_____

Title_____

Company_____

Date_____ Phone Number_____

Certification Number_____

GENERAL INSTRUCTIONS

A separate notification form **must be filled out for each site** at which tanks are located. The questions are generally self-explanatory. Complete those sections of the form that pertain to your site.

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TYPE OF NOTIFICATION

- ✓ Check the **NEW FACILITY** box if this is the first time a notification form has been submitted for this site.
 - ✓ Check the **AMENDED** box if this is an update of a previously submitted notification form
 - ✓ Check the **CLOSURE** box **only** if you are **closing all tanks within this site. Please do not forget to indicate the number of tanks at this facility, below the new facility box in this section.**
- I. **OWNERSHIP OF TANK(S)** – If you own more than one site, please indicate the same ownership information for **all sites owned**.
- II. **LOCATION OF TANK(S)** - A separate notification form must be filled out for **each site** at which tanks are located. Please, no P.O. Boxes, a specific street address is needed.

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SECTIONS III.-IV. Are self-explanatory.

VII. **CERTIFICATION** – Make sure that this section is properly filled out and **signed**.

VIII. **FINANCIAL RESPONSIBILITY** (insurance) – Check the **STATE INSURANCE FUND** box **only** if you have been issued an insurance policy by Idaho's Petroleum Storage Tank Fund.

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IX. **DESCRIPTION OF UNDERGROUND STORAGE TANKS** – Beginning on page 3 and continuing on pages 4 and 5, make sure you provide an identification number for **each tank** and answer the questions that pertain to the tank. If, for example, you put tank number 1 information in column 1 on page 3, please make sure that tank number 1 information stays in column 1 on pages 4 and 5.

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X. **TANKS OUT OF USE, OR CHANGE IN SERVICE** – Mark yes in the **CHANGE IN SERVICE** box only if you now store an unregulated material in a tank that once stored a regulated material, i.e. gasoline to water. If this has occurred you **must** complete a site assessment because this change is considered the same as closing a tank.

SITE ASSESSMENT COMPLETED – A site assessment is required for all tanks closed since December 22, 1988. Site assessment requirements can be obtained from the Idaho Department of Environmental Quality through the address provided on page 1 of this form. Refer to Information Series #3 through our web site identified below.

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XI. **CERTIFICATION OF COMPLIANCE** – This section **must** be completed **and signed** by the installer **only** if work on your underground storage tank system has taken place since December 22, 1988. If you, the owner, conducted the work, you **must** sign this page. **If the work was completed before December 22, 1988 the owner must complete this page if any of this information currently applies, however, no signature is needed.**

You can also access this form via our website:
www.deq.state.id.us/ust/ustinfoseries.htm